MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10 / 048 104
FILING DATE
APPLICANT(S)

2-13-04

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
1	1						51							
2		1					52							
3	1						53							
4	1						54							
5		4					55							
6		4					56							
7	1						57							
8		8					58							
9		8					59							
10		8					60							
11							61							
12							62							
13							63							
14							64							
15							65							
16							66							
17							67							
18							68							
19							69							
20							70							
21							71							
22							72							
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24							74							
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33							83							
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35							85							
36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	4		2				TOTAL IND.							
TOTAL DEP.	12		6				TOTAL DEP.							
TOTAL CLAIMS	16		8				TOTAL CLAIMS							

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL